

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: <u>ethics@honolulu.gov</u> Website: <u>http://www.honolulu.gov/ethics/</u>

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HONOLULU ETHICS COMMISSION RECEIVED

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2019 REGISTRATION

Lobbyist Registration (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)				
Gold Joy				
LOBBYIST FIRM/EMPLOYER (if applicab	ie)	TELEPHONE		
Joy Gold Unlimited, Inc.		808-368-1146		
MAILING ADDRESS (No. and Street or	P.O Box)	FAX		
PO Box 88555		EMAIL joy@joygolduplimits		
(0)		Joy@Joygolddriiiffille	ed.com	
(City) Honolulu	(State) HI	(Zip Code) 96830		
PART II.A ORGANIZATION				
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONESC		
Dart Container Corporation		949 262 3255 362 - 24	13-6433	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX		
4000 Barranca Parkway		EMAIL		
(City)	(01-1-1	EMAIL jonathan.choi@dart.	biz	
Irvine	(State) CA	(Zip Code) 92604		
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)				
I			Not Applicable	
METHODS USED BY MEMBERS TO M	AKE POLICY DECISIONS			
		<u> </u>	Not Applicable	
-				
PART II.B NO LONGER LOBBYING				
☐ I am no longer authorized to lobby on behalf of the organization in Part II.A DATE				

Rev. 11/2018

OF SUBJE	CTS ON WI	HICH	YOU EXPECT TO LOBBY	
□Community Services			□Customer Services	
□Housing	□Housing		■ Public Works, Infrastructure & Sustainability	
□Public Hea	□Public Health, Safety & Welfare		□Tourism	
□Zoning & Planning			□ Specific Legislation: □ Additional Sheet(s) Attached Bill No. 92 (Year)2018 Reso No	
RTIFICATIO	N			
This		is 7 : JUS : GARY OR : comm	January 2019 January 2019 JUSTIN ACIDO YOR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS Dommission expires: 22 10 2 7	
	TITLE OF AU	ED Reg	ZING OFFICER OR PERSON Gov Affairs nvironment	
NAME OF ORGANIZATION (if applicable) Dart Container Corporation		TELE	PHONE So 949-282-3256 562-243-6433	
MAILING ADDRESS (No. and Street or P.O Box) 4000 Barranca Parkway		FAX		
		EMAI	L jonathan.choi@dart.biz	
(State) CA (Zip		(Zip C	Code) 92604	
		activitie	es on behalf of the undersigned. / 4 / 19 (Date)	
	Community Housing Public Head Zoning & F RTIFICATIO Patements are to At or P.O Box) (State) CA person to engage	Community Services Housing Public Health, Safety & We Zoning & Planning Su Th By NOT My TITLE OF AU REPRESENTE (State) (State) CA	□ Housing □ Public Health, Safety & Welfare □ Zoning & Planning RTIFICATION Patements are true and □ This 1/2 By: JUS NOTARY OR My comm 1/22 N TO LOBBY TITLE OF AUTHORI REPRESENTED Reg & E & E ### TELE ### OF AUTHORI REPRESENTED Reg & E ### TELE ### OF AUTHORI REPRESENTED Reg & E ### TELE ### OF AUTHORI REPRESENTED Reg & E ### TELE #### OF AUTHORI REPRESENTED Reg & E #### TELE #### OF AUTHORI REPRESENTED Reg & E #### TELE ##################################	



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2019 REGISTRATION

Lobbyist Registration (Type or Print Clearly)

PART I LOBBYIST					
NAME (Last) (First) (Middle)					
Gold Joy					
LOBBYIST FIRM/EMPLOYER (if applicable)		TELEPHONE			
Joy Gold Unlimited, Inc.		808-368-1146			
MAILING ADDRESS (No. and Street or P.O Box)		FAX			
PO Box 88555		EMAIL joy@joygoldunlimited.com			
(City) Honolulu	(State)	(Zip Code) 96830			
PART II.A ORGANIZATION					
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE			
KYD, Inc. dba: K. Yamada Distributors		808-836-7301			
MAILING ADDRESS (No. and Street or P.O. Box)		FAX			
2949 Koapaka Street		EMAIL dy@kyd-inc.com			
(City) Honolulu	(State) HI	(Zip Code) 96819			
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)			Not Applicable		
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS			Not Applicable		

PART II.B NO LONGER LOBBYING	
☐ I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY					
☐Business & Economic Development	□Community Services			□Customer Services	
□Culture & Arts	□Housing			⊠Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health	n, Safety & We	lfare	□Tourism	
□Transportation	□Zoning & Planning			☐Specific Legislation: ☐Additional Sheet(s) Attached Bill No. 92 (Year)2018 Reso No	
☐Other (indicate below):					
PART IV LOBBYIST CER	TIFICATION	V			
I hereby certify that the foregoing statements are true and correct. This By: JH LOBBYIST SIGNATURE My corr		y: JU	Tany of Janyary 2019 USTIN ACIDO OR ANY OFFICIAL AUTHORIZED TO ADMINISTRATION THE MACIDO In the second s		
NAME			NEINO OF FIGER OF FEROOM		
Dexter Yamada		INCTINCOLIN	P	Tesident	
NAME OF ORGANIZATION (if applicable)		TE	LEPHONE		
KYD, Inc. dba: K. Yamada Distributors			808-836-7301		
MAILING ADDRESS (No. and Street or P.O Box)		X			
2949 Koapaka Street		EN	MAIL dy@kyd-inc.com		
(City) Honolulu	(State) HI			p Code) 96819	
I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.					
tot - Jan 9. 2019					
(Signature of Authorizing Officer or Person Represented)		(Date)			